FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D.C. 20

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB NUMBER: 3235-0076
Expires: April 30, 2008

07050265

	/3838	" / ()	•		'
Name of Offering (check if this	is an amendment and name has changed, and indi-	ate change	.) SEC.	PECENTO CO	
Filing Under (Check box(es) that apply Type of Filing: New Filing	y): □ Rule 504 □ Rule 505 ☒ Rule 50 ☒ Amendment .	6 🗆 S	ection 4(6) AB	2000	
· · ·	A. BASIC IDENTIFICATION DA	TA	120	1 6 200 V	<u> </u>
1. Enter the information requested about	out the issuer		EI	1007	
Name of Issuer (☐ Check if this is a Pico Bonito, LLC	an amendment and name has changed, and indicate	change.)	10/10	% GECTION	
Address of Executive Offices 471 Weston Road, P.O. Box 812492,	(Number and Street, City, State, Z Wellesley, MA 02482	p Code)	Telephone Numb (781) 492-6128	per (Including Area	Code)
Address of Principal Business Operati (if different from Executive Offices)	ons (Number and Street, City, State, Z	p Code)	Telephone Numb	per (Including Area	Code)
Brief Description of Business Holding company for wholly-owned st credit cards in the People's Republic of	ubsidiaries who provide a solution for companies of China	rganized in	the People's Repu	blic of China to iss	ue
Type of Business Organization		. • • • • • • • • • • • • • • • • • • •		·	
□ corporation	☐ limited partnership, already formed	⊠c	ther (please specif	y): limited liability	
□ business trust	☐ limited partnership, to be formed			company 📮	ROCESSEL
Actual or Estimated Date of Incorpora Jurisdiction of Incorporation or Organ	tion or Organization: ization: (Enter two-letter U.S. Postal Service abbre CN for Canada; FN for other foreign juris		⊠ Actual	D Estimated	APR 1 7 2007

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter		☐ Executive Officer	☐ Director	Manager
Full Name (Last name first, if indi	vidual)		• .		
Lapides, Robert L.	•				•
Business or Residence Address	(Numb	er and Street, City, State, 2	lip Code)		
471 Weston Road, P.O. Box 8124	92, Wellesley, MA	N 02482			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ Manager
Full Name (Last name first, if indi	vidual)	<u></u>			
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)	· · · · · · · · · · · · · · · · · · ·	
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ Manager
Full Name (Last name first, if indi	vidual)	<u> </u>			
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		` .
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ Manager
Full Name (Last name first, if indi	vidual)				· · · · · · · · · · · · · · · · · · ·
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ Manager
Full Name (Last name first, if indi	vidual)			······	<u>. </u>
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if indi	vidual)	· · · · · · · · · · · · · · · · · · ·			
Business or Residence Address	(Numb	er and Street, City, State, 2	Cip Code)		•
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if indi	vidual)	-			
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		

	i i			B. INFO	ORMATIO	N ABOUT	OFFERI	NG.	, ,		·	
1 17 41 14							a in this of	forim of			-	lo
1. Has the iss	uer sold, o	r does the is	suer intend	i to sell, to i	non accredit	ed investor	rs in this of	ering/				
			Ans	wer also in	Appendix, (Column 2,	if filing und	ler ULOE.				
2. What is the	e minimum	investmen	that will b	e accepted	from any in	dividual?					\$ 25,000	!
				,	,						res N	lo
3. Does the o	ffering per	mit joint ow	nership of	a single un	it?							נ
4. Enter the irremuneration agent of a bro persons to be Full Name (L. Business or R	for solicita ker or deal listed are a ast name fi	tion of pure er registered ssociated por rst, if indivi	hasers in coll with the Sersons of sudual)	onnection v SEC and/or sch a broke	vith sales of with a state r or dealer, y	securities or states, l you may se	in the offeri	ing. If a pe	rson to be I ker or deale	isted is an r. If more	associated than five (person or
Dusiness of K	esidence A	1401035 (140	mber and 5	ucci, City,	ouic, zip c	.ouc)						
Name of Asso	ciated Bro	ker or Deals	-r	· ·				<u>:</u>			· · · · · ·	•
0171330		v										
States in Whi	ch Person I	isted Hac S	Solicited or	Intends to	Solicit Purel	hasers					•	
-		or check ind									🗅 A	all States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	. [PA]
' [RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (La	ast name fi	rst, if indivi	dual)									·
Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						•
Name of Asso	ociated Bro	ker or Deal	 er									·
	,											
States in Whi		Listed Has S				hasers						All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	(VT)	[VA]	[WA]	[WV]	[Wi]	[WY]	[PR]
Full Name (L	ast name fi	rst, if indivi	idual)									•
Business or R	anida A	ddaga Ol		tennt City	State 7:- 6	'ada)						
Business of K	esidence A	uaress (Nu	mber and S	oreet, City,	State, Zip C	.ode)						
Name of Asso	ociated Bro	ker or Deal	 er									
States in Whi		Listed Has S										II Stotes
(Cneck "/	An State (F CHECK INC [AZ]	IVIOUAI SIA [AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	 [HI]	(IID)
(IL)	[IN]	[IA]	(KS)	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	įwη	(WY)	(PR)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \Box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		•
		Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$ <u>`</u>
	Equity	S	\$
	□ Common □ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)LLC Interests	\$_5,500,000	\$ <u>350,000</u>
	Total		\$ 350,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u> , indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
		•	
	Accredited Investors		
	Non-accredited Investors		\$ <u> 0</u>
	Total (for filings under Rule 504 only)	<u>. </u>	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
	If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		•
	Type of offering	Type of	Dollar Amount
	Rule 505	Security	Sold \$
	Regulation A		\$
	Rule 504		S
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		□ \$
	Printing and Engraving Costs		- ·
	Legal Fees		- ·
	Accounting Fees		
	Engineering Fees		- \$
	Sales Commissions (specify finders' fees separately)		- \$
	Other Expenses (identify) blue sky filing fees		■ \$ 1,000
	Total		⊠ \$ 1,000 .
			<u></u>

I and total expenses furnished in a	eggregate offering price given in response to Part C - Question esponse to Part C - Question 4.a. This difference is the user."			٠	\$ <u>5,499,000</u>
used for each of the purposes shown. estimate and check the box to the left	usted gross proceeds to the issuer used or proposed to be If the amount for any purpose is not known, furnish an t of the estimate. The total of the payments listed must equal uer set forth in response to Part C - Question 4.b above.				
			Payments to Officers, Directors, & Affiliates		Payments To Others
Salaries and fees			\$		
Purchase of real estate		. 🗖	\$		S
	stallation of machinery and equipment		\$		\$
Construction or leasing of plant l	Construction or leasing of plant buildings and facilities				
offering that may be used in excl	including the value of securities involved in this nange for the assets or securities of another	_	s		s
	·		\$ <u>·</u>		\$
Working Capital	***************************************		s _	. ⊠	S
Other (specify): purchase securit	ies in Pico Bonito-Ecologic USA, LLC	ø	s		\$ 5,499,000
Column Totals			s	· 🔯	\$_5,499,000
Total Payments Listed (Column t	otals added)		❷ \$_	5.4 9	9,000
	THE DESIGNATURE THE STREET	1.12014		<u>जिल्ला</u>	mperiuski
	1				
following signature constitutes an un	be signed by the undersigned duly authorized person. If this no dertaking by the issuer to furnish to the U.S. Securities and Exch by the issuer to any non-accredited investor pursuant to paragra	ange (Commission, ur	oon 1	25, the written request
suer (Print or Type)	Signature 1		Date	•	
ico Bonito, LLC	19 Min		A _I	ri	1 10, 20
lame of Signer (Print or Type)	Title of Signer (Print or Type)	•••			
Robert L. Lapides	Manager				

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E STATE SIGNATURE		
1. Is any party described in 17 CFR 230.262 j of such rule?	presently subject to any of the disqualification provisions	Ýes □	No ⊠
	See Appendix, Column 5, for state response.		•
2. The undersigned issuer hereby undertakes form D (17 CFR 239,500) at such times a	to furnish to any state administrator of any state in which this notic is required by state law.	ce is filed, a notice on	
3. The undersigned issuer hereby undertakes issuer to offerees.	to furnish to the state administrators, upon written request, informa-	ation furnished by the	
limited Offering Exemption (ULOE) of th	issuer is familiar with the conditions that must be satisfied to be en e state in which this notice is filed and understands that the issuer ishing that these conditions have been satisfied.	ntitled to the Uniform claiming the availability	
The issuer has read this notification and know undersigned duly authorized person.	s the contents to be true and has duly caused this notice to be signif	ed on its behalf by the	
Issuer (Print or Type)	Signature	Date	
Pico Bonito, LLC	I MA MAN	April 10, 2007	7
Name of Signer (Print or Type)	Title of Signer (Print or Type)		٠.
Robert L. Lapides	Manager		٠.

Instruction
Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	Intended to non-a	d to sell accredited rs in State 3-ltern 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No '	LLC interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL			,					`		
AK				· · · · · · · · · · · · · · · · · · ·				•		
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APPENDIX 2 - 7 1

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	to non-a	d to sell . accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			under Sta (if yes, explant waiver j	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	, No	LLC interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
MT											
NE									 ,		
NV								t.			
. NH		· · · · · · · · · · · · · · · · · · ·						· · · · · · · · · · · · · · · · · · ·			
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